

Instructions For Processing The FSA-153 Using the PDF fillable form on the Farm Service Agency Forms Online Web Site

(Note: the FSA-153 is included on the subsequent pages of this document.)

1. Thank you for accessing the FSA-153 to meet the reporting requirements of the Agricultural Foreign Investment Disclosure Act.
2. Fill in the required information in the appropriate boxes by tabbing through the fields. For the check boxes, simply click your left mouse button in the check box area and a check mark will be entered. If you want to remove a check mark, simply click in the box again.
3. Print the form. Sign and date in Box No. 14 at the bottom of the FSA-153. **DO NOT ATTEMPT TO SEND THIS FORM AS AN E-MAIL ATTACHMENT.** Your original signature is required on the form. Electronic versions are not acceptable.
4. Mail the completed FSA-153 to the County FSA Office where the agricultural land is located. To obtain the county address do the following:
 - Return to the FSA home page (<http://www.fsa.usda.gov>).
 - Click on the office locator button.
 - Click on the appropriate State.
 - Click on the "State and County Office Information" line. This line links to the State map showing all the counties in that State.
 - Click on the county where your land is located. Address and telephone information is presented. Mail the completed, signed, and dated form to the mail address shown.
5. For further information, contact:

William A. Brown
Branch Chief
USDA-FSA-FIDB
STOP 0531
Room 2741-S
1400 Independence Ave., S.W.
Washington, D.C. 20250-0531

or telephone at (202) 720-6833.

FSA-153
U.S. DEPARTMENT OF AGRICULTURE
 Farm Service Agency
AGRICULTURAL FOREIGN INVESTMENT DISCLOSURE ACT REPORT

NOTE: Read Instructions on reverse Before Filing in Any Data Below. If Additional Space is Needed, Use Reverse.

ITEM

OFFICE
USE
ONLY

ITEM

2. Tract Location and Description**A. LEGAL DESCRIPTION OR FSA TRACT NUMBER****B. COUNTY OR PARISH****C. NO. OF ACRES****D. STATE****3. Owner of Tract (in item 2A) (See Reverse)****A. NAME****B. ID NO. (Nine digits)**CHECK IF NO.
NOT KNOWN**C. LEGAL ADDRESS (Street, City, State)****D. Type of Owner (Check One)**

1. Individual (including husband/wife)

a. Citizenship of Individual

2. Government (name of country)

3. Organization

- a. Type
-
- 1) Corporation

2) Partnership

3) Estate

4) Trust

5) Institution

6) Association

7) Other

b. Gov't. or country under whose law the organization is created

c. Principal place of business (for organizations only)

d. List on separate sheet, the Name, Address and Country of all foreign persons who individually or in the aggregate hold significant interest or substantial control 1/ in the person owning the land.

E. Complete only if item 1C - Land Disposition - is checked

1. NAME OF PERSON RECEIVING TRACT

2. ADDRESS (Street, City, State/Province, Country)

3. CITIZENSHIP USA FOREIGN UNKNOWN

4. Representative of Foreign Person (completing form, if applicable)

A. NAME**B. ADDRESS (Street, State, Country)****C. TELEPHONE NO. (Area Code)****D. Relationship of Representative to Foreign Person**

1. Attorney

2. Manager

3. Agent

4. Other (Explain on Reverse)

1. TYPE ACTIVITY (See Reverse) (Check one)

- | | | | | | | |
|-----------------------------------|--------------------------|--------------------------|--------------------------|---------------------------------------|--------------------------|--------------------------|
| A. Land Holding | <input type="checkbox"/> | B. Land Acquisition | <input type="checkbox"/> | C. Land Disposition | <input type="checkbox"/> | |
| D. Land Use Change To Agriculture | | <input type="checkbox"/> | | E. Land Use Change To Non-Agriculture | | <input type="checkbox"/> |

5. Type of Interest Held in the Agricultural Land (Check One)

- | | | | |
|-----------------------------|---------|--------------|---|
| A. Fee Interest (ownership) | Whole | | |
| B. Fee Interest (ownership) | Partial | WHAT PERCENT | % |
| C. Life Estate | | | |
| D. Trust Beneficiary | | | |
| E. Purchase Contract | | | |
| F. Other (explain) | | | |

6. How was this Tract Acquired or Transferred?

- | | | |
|--------------------------------------|--|--|
| A. Cash Transaction | | |
| B. Credit or Installment Transaction | | |
| C. Trade | | |
| D. Gift or Inheritance | | |
| E. Foreclosure | | |
| F. Other (explain) | | |

7. Value of Agricultural Land

- | | |
|--|----|
| A. Purchase Price of Land or if a land disposition, the original price paid by seller | \$ |
| B. Non-Purchase, Estimated Value at the Time of Acquisition | \$ |
| C. What is the estimated current value or if a land disposition, the selling price of the tract of land? | \$ |
| D. How much of purchase price in Item 7A remains to be paid? | \$ |

8. Date of Acquisition or Transfer (See Reverse)

MONTH

DAY

YEAR

9. Current Land Use (Usual use of land. For idle land, report as other Agriculture.) Report in Whole Numbers

- | | | |
|----------------------|--|--|
| A. Crop | | |
| B. Pasture | | |
| C. Forest or Timber | | |
| D. Other Agriculture | | |
| E. Non-Agriculture | | |

F. Total (Should equal 2C)**10. Intended Use as of This Date (Check One)**

- | | | |
|----------------------|--|--|
| A. No Change | | |
| B. Other Agriculture | | |
| C. Non-Agriculture | | |

11. Relationship of Owner to Producer (If applicable)

- | | | |
|---------------------------|--|--|
| A. Producer is: | | |
| 1. Owner | | |
| 2. Manager | | |
| 3. Tenant or sharecropper | | |
| B. Rental agreement is: | | |
| 1. A crop share | | |
| 2. Cash or fixed rent | | |

12. The Producer on This Tract is:

- | | | |
|---|--|--|
| A. The same person as when the tract was acquired | | |
| B. A new person | | |

13. CERTIFICATION - I certify that the information entered in this report is complete and correct. I understand that falsification of reporting is subject to a civil penalty not to exceed 25% of the fair market value of the interest held in the tract of land.**14. SIGNATURE (Owner or legally authorized representative)**

TITLE

DATE

The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is P.L. 95-460. The information will be used to determine the effects of foreign persons acquiring, transferring and holding agricultural land and the effects of such activity on family farms and rural communities. Furnishing the requested information is mandatory. Failure to comply or falsification of reporting is subject to civil penalty, not to exceed 25 percent of the fair market value of the interest held in the tract on the date of the assessment of such penalty.

NOTE:

Federal Agencies may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM (OMB No. 0560-0097), Stop 7630, Washington, D.C. 20250-7630. RETURN THIS COMPLETING FORM TO YOUR COUNTY FSA OFFICE.

DETERMINATION OF "FOREIGN PERSON" STATUS

DEFINITION: "Person" means any individual, corporation, company, association, firm, partnership, society, joint stock company, trust, estate, or any other legal entity.

You are a "foreign person" under the provisions of P.L. 95-460 and must complete the front side of this form (FSA-153) if your answer is "NO" to all the statements numbered **1, 2, and 3** below.

1. I AM a citizen of the United States.

YES NO

2. I AM a citizen of the Northern Mariana Islands or the Trust Territories of the Pacific Islands.

3. I AM lawfully admitted to the United States for permanent residence, or paroled into the United States, under the Immigration and Nationality Act.

You are a "foreign person" under the provisions of P.L. 95-460 and must complete the front side of this form (FSA-153) if your answer is "YES" to any of the statements numbered **4a, 4b, and 5** below.

YES NO

4. I AM a "person" other than an individual or government, which is created or organized under the laws of:

a. A foreign government of which has its principal place of business located outside the United States.

b. Any State of the United States, and in which significant interest or substantial control *1/* is held directly or indirectly by any foreign individual, government, or person.

5. I AM a foreign government.

GENERAL INSTRUCTIONS

Complete this form in an original and three copies for each tract of land. Insertion of carbons is necessary. Request as a tract all acreages under the same ownership in each county or parish acquired or transferred on the same date. Land in different counties or parishes and land acquired or transferred on different dates must be reported as separate tracts.

Return the original and two copies to the County Farm Service Agency (FSA) Office where the tract of land is located. Retain the last copy (Foreign Person Copy) for your records. DO NOT SEND THIS FORM DIRECTLY TO WASHINGTON, D.C. UNLESS GRANTED PERMISSION BY THE FSA IN WASHINGTON, D.C.

After the original disclosure on FSA-153 on the tract(s) of land owned by the same person within a country or parish, each subsequent change of ownership or use must be reported by filing another FSA-153.

ITEM INSTRUCTIONS AND REPORTING DATES**ITEM 1. ONLY ONE BOX MAY BE CHECKED**

If the tract of land to be listed under item 2 on the front side of this document was:

-Owned on February 1, 1979, check A. Land Holding Reporting Date: This document is required to be completed and returned by August 1, 1979.

If the tract of land to be listed under item 2 on the front side of this document was, on or after February 2, 1979:

-Acquired, check B. Land Acquisition
 -Disposed of, check C. Land Disposition
 -Changed from non-agricultural to agricultural use, check D. Land Use Change To Agriculture
 -Changed from agricultural to non-agricultural, use check E. Land Use Change To non-Agriculture

Reporting Date:

If any of these activities are checked in Item 1, return the completed FSA-153 within ninety (90) days from the date of the transaction.

ITEM 8. The date entered would be as follows for the activity checked in Item 1:

Box A or B - Date acquired.
Box C - Date disposed of.
Box D or E - Date land use changed.

ADDITIONAL INFORMATION (Use additional sheets if more space is needed)

1/ Significant interest or substantial control as defined in 7 CFR 781.2 (k).

This program or activity will be conducted on a nondiscriminatory basis without regard to race, color, religion, national origin, age, sex, marital status, or disability.